

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO. 1412939/35 FILING DATE

APPLICANT(S)

151101

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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49						
50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

TOTAL IND.	2			
TOTAL DEP.	17			
TOTAL CLAIMS	19			